## **CLAIMS ONLY**

| SERIAL NO. | FILING DATE | 1/-22-5/ | APPLICANT(S)

| 1<br>2<br>3<br>4<br>5<br>6<br>7<br>8 | IND.   | DEP.   | 1st AME | NUMERA   |                 | ΓER            |
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| 2<br>3<br>4<br>5<br>6<br>7<br>8      | 1  |  | IND.    | DEP.   | 2nd AME<br>IND. | NDMENT<br>DEP. |
| 2<br>3<br>4<br>5<br>6<br>7<br>8      | <del>                                     </del> |  |         | OLF.   | IND.            | DEF.           |
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| TOTAL IND.                           | 3  | 1  |         | 1  |                 | 1              |
| TOTAL                                | 11   | · 🕶  |         | -  | <del></del>     | *              |
| DEP.                                 | 20   |  |         |  |                 |                |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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